Docket No.: 100126

PLICATION FOR UNITED STATES PATE DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

described and claimed in the specification:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

USING STRUCTURED REPRESENTATIONS TO INDEX RECORDINGS OF ACTIVITY

	attached hereto. filed on 12/30/98 as Appli te that I have reviewed and u y any amendment referred to	inderstand the content	6 and amended on cs of the above-identified spec	(if applicable). ification, including the		
defined in Title 37, C	ode of Federal Regulations,	§1.56. Under Title 3:	on known to me to be material 5, U.S. Code §119, the priorite cation(s) filed within one year	y benefits of the		
The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the abovenamed foreign priority application(s) and/or United States provisional application(s):						
	point the following as my att to transact all business in the		full power of substitution and	u		
James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Registration No. 32,771; Mario A. Costantino, Registration No. 33,565; and John Beck, Reg. No. 22,833.						
ALL CORRESPON BERRIDGE, PLC,	IDENCE IN CONNECTIO P.O. BOX 19928, ALEXAI	ON WITH THIS APP NDRIA, VIRGINIA	PLICATION SHOULD BE 9 22320, TELEPHONE (703)	SENT TO QUIFF & 836-6400.		
herein of my own kn further that these state by fine or imprisonm	owledge are true and that all ements were made with the lent, or both, under Section 1 ardize the validity of the app	statements made on i knowledge that willfu 1001 of Title 18 of the	ents of this Declaration, and the information and belief are belief also statements and the like United States Code and that sissued thereon.	eved to be true; and so made are punishable		
of First or Sole Inventor		Scott	L.	MINNEMAN		
2 **INVENT	OR'S SIGNATURE:	Given Name	Middle Initial	Family Name		
3 **DATE O	F SIGNATURE:	3	7 31	1999		
		Month	Day	Year		
Residence:	San Francisc		California	U.S.A.		
Citizenship:			State or Province	Country		
	Post Office Address:					
	(Insert complete	1550 Noe Street				
	mailing address, including country) San Francisco, California 94131 U.S.A.					
*This form may be ex	ecuted only when attached to	the specification (inclu	ding claims) at the end thereof	if Box a. is checked.		

^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.



Page 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor applications)

1	Typewritten F	ull Name				
	of Second Joi	nt Inventor (if any)	William		VAN MELLE	
		•	Given Name	Middle Initial	Family Name	
2	**INVENTO	R'S SIGNATURE:	Willia			
3	**DATE OF	**DATE OF SIGNATURE:		30	99	
			Month	Day	Year	
	Residence:	Los Altos	Califor	mia	U.S.A.	
		City	State or Province		Country	
	Citizenship:	U.S.A.				
	Citizonomp.	Post Office Address:				
		(Insert complete	651 Distel Drive			
		mailing address,		4000 TT G 4		
		including country)	Los Altos, California 9			
1	Typewritten Full Name of Third Joint Inventor (if any)		Steve	R.	HARRISON	
	oj Intra Joini	inventor (if any)	Given Name	Middle Initial	Family Name	
		DIC CECNATURE.	61 b		- 	
2	**INVENTO	R'S SIGNATURE:	7~ K			
3	**DATE OF	SIGNATURE:	Mar	29	1999	
			Month	Day	Year	
	Residence:	Portola Valley	California		U.S.A.	
		City	State or Province		Country	
	Citizenship:	U.S.A.				
		Post Office Address:				
		(Insert complete	134 Russell Avenue			
		mailing address, including country)	Portola Valley, Californ	ia 94028 IISA		
	Typewritten F		i ortona varioy, camora	3,020 0,0.71.		
•	of Fourth Joint Inventor (if any)		Ian .	Emery	SMITH	
	, –		Given Name	Middle Initial	Family Name	
;	**INVENTO	R'S SIGNATURE:	1 1 E	\mathcal{M}_{\bullet}		
3	**DATE OF SIGNATURE:		OU OU	12	99	
,	DATEOF	SIGNATURE.	Month	Day	Year	
	D!: I	San Francisco	Califor	•	U.S.A.	
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	G	U.S.A.	bate of Hovine		Country	
	Citizenship:	Post Office Address:	· · · · · · · · · · · · · · · · · · ·			
		(Insert complete	421 Gates Street			
		mailing address,				
		including country)	San Francisco, California 94110 U.S.A.			
!	Typewritten Full Name					
	of Fifth Joint Inventor (if any)		Thomas	P.	MORAN Family Name	
			Given Name	Middle Initial	Family Name	
2	**INVENTOF	R'S SIGNATURE:	Thus I ha			
3	**DATE OF SIGNATURE:		~ 3	29	1999	
			Month	Day	Year	
	Residence:	Palo Alto	California		U.S.A.	
		City	State or	Country		
	Citizenship:	U.S.A.				
	-	Post Office Address:	1037 Greenwood Avenue			
		(Insert complete				
	countma)	mailing address, including	g Palo Alto, California	94301 ILS A		
	country)		_ i wo Alio, Califollia	J 1001 O.D.21.		

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the specification (including claims) of the application to which it pertains.